

REMARKS

Claims 1-11, 15-26, 30-31, 34-41 and 44 are pending. Claims 12-14, 27-29, 32-33, and 42-43 have been cancelled without prejudice or disclaimer of the subject matter contained therein. Claim 45 is newly added. As a preliminary matter, the undersigned requests an interview with the examiner on May 29th, 2009 at 9:00 A.M. eastern stand time for the purpose of discussing the cited art relative to the independent claims.

Claims 1-11, 15-26, 30-1, 34-41 and 44 stand variously rejected under 35 U.S.C. §103(a) as being unpatentable based upon US Patent No. 7,262,650 issued to Chow et al. in view of US Patent No. 6,704,580 issued to Halderman. Applicants respectfully traverse.

The present application discloses a method for locating a site along a cardiovascular system (e.g., the coronary sinus ostium) by advancing a device to an area downstream from the site (e.g., the atrium) and observing the direction of flow of a delivered contrast medium within the area and away from the site. The device can then be advanced upstream through the direction of the flow of the contrast medium into the site. The contrast medium is injected prior to advancing the device into the site. Observing the direction of flow of the contrast medium away from the site, aids in locating the site and provides guidance for advancing the device into the first site. For example, claim 1 recites “delivering a contrast medium from a distal end of the delivery device within the area to locate the first site by observing the direction of the flow of the delivered contrast medium in the area away from the first site; and further advancing the delivery device upstream through the direction of the flow of the contrast medium into the first site.”

The cited prior art does not teach or suggest all of the limitations in the independent claims. For example, Chow is primarily directed to the use of ultrasound instead of fluoroscopy to guide a catheter from the right atrium to the coronary sinus. The Chow catheter includes one or more ultrasound sensors 106 proximal to the distal end 104 of the catheter 100. Chow teaches away from the use of the contrast media. While Chow discusses the use of fluoroscopy in

order to make the catheter tip visible, Chow asserts his method is better than fluoroscopy. See Chow, col. 5 lines 1-8. Chow states that using the wall motion to detect the movement of the catheter's distal end reduces a patient's exposure to x-ray radiation.

Additionally, the United States Patent & Trademark Office (USPTO) concedes at page 3 of the final Office Action that Chow fails to teach or suggest "advancing the delivery device upstream through the direction of the contrast medium into the first site" as in claim 1. The USPTO instead relies upon Haldeman for teaching this limitation.

Hadelman is directed to the use of a Doppler sensor 102 to guide a catheter 100 from the turbulent flow found in the right atrium to the laminar flow found in the coronary sinus. See, for example, Hadelman, col. 9, lines 53-65. Nowhere in Hadelman does it disclose, teach or suggest "advancing the delivery device upstream through the direction of the contrast medium into the first site." For at least this reason, the independent claims are non-obvious based upon the cited art.

Moreover, it is respectfully requested that the examiner provide specific cites in the prior art for each claim limitation since the undersigned was unable to locate support for purported disclosure of the limitations in the cited art. For example, the French size of the delivery device found in claim 31 was not found in either of the cited references.

Claim 45 is newly added. Exemplary support for claim 45 can be found on [0049] of page 15 of the application, which states, in pertinent part:

By enabling contrast agent 210 to be injected through thru lumen 154 of device 100, the present invention eliminates the need for removing device from guide catheter 204 once guide catheter is positioned within coronary sinus 202 and inserting a separate venogram balloon catheter within coronary sinus 202 via guide catheter 204 to inject contrast agent 210.

Applicant asserts that the remarks presented herein are fully responsive to the Office Action and are sufficient to overcome the rejections presented in the

Office Action. However, there may be other arguments to be made as to why the pending claims are patentable. Applicant does not concede any such arguments by having not presented them herein. Further, Applicant reserves the right to re-present any originally filed, cancelled, and/or previously unclaimed subject matter in a subsequently filed continuing application without prejudice or disclaimer. Applicant respectfully asserts that the present claims are in condition for allowance. Withdrawal of the instant rejections and issuance of a Notice of Allowance is respectfully requested.

Should any issues remain outstanding, the Examiner is urged to telephone the undersigned to expedite prosecution. The Commissioner is authorized to charge any deficiencies and credit any overpayments to Deposit Account No. 13-2546.

Respectfully submitted,

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